

PTO/SB/01A (10-00)
Approved for use through 10/31/2002. OMB 0651-0032
U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

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DECLARATION (37 CFR 1.63) FOR UTILITY OR DESIGN APPLICATION USING AN APPLICATION DATA SHEET (37 CFR 1.76)

As the below named inventor(s), l/we declare that:						
This declaration is directed to:						
☐ The attached application, or						
X Application No. 10/708,021 , filed on February 3, 2004,						
as amended on(if applicable);						
I/we believe that I/we am/are the original and first inventor(s) of the subject matter which is claimed and for which a patent is sought;						
I/ we have reviewed and understand the contents of the above-identified application, including the claims, as amended by any amendment specifically referred to above;						
I/we acknowledge the duty to disclose to the United States Patent and Trademark Office all information known to me/us to be material to patentability as defined in 37 CFR 1.56, including material information which became available between the filing date of the prior application and the National or PCT International filing date of the continuation-in-part application, if applicable; and						
All statements made herein of my/own knowledge are true, all statements made herein on information and belief are believed to be true, and further that these statements were made with the knowledge that willful false statements and the like are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001, and may jeopardize the validity of the application or any patent issuing thereon.						
FULL NAME OF INVENTOR(S)						
Inventor one: Jonas Hogstrom						
Signature: Citizen of: Sweden						
Inventor two: Anders Ivner						
Signature: Citizen of: Sweden						
Inventor three: Jan Norden						
Signature: Citizen of: Sweden						
Inventor four:						
Signature: Citizen of:						

Additional inventors are being named on additional form(s) attached hereto.

Burden Hour Statement: This collection of information is required by 35 U.S.C. 115 and 37 CFR 1.63. The information is used by the public to file (and the PTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This form is estimated to take 1 minute to complete. This time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.



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PTO/SB/81 (10-00)

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POWER OF ATTORNEY OR AUTHORIZATION OF AGENT

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Application Number	10/708,021
Filing Date	February 3, 2004
First Named inventor	Hogstrom
Group Art Unit	Unassigned
Examiner Name	Unassigned
Attorney Docket Number	BORL/0217.00

I hereby appoint:			P	lace Customer	
X Practitioners at Customer Number 28653 Number Bar Code					
<i>OR</i> ☐ Practitioner(s) na	med below:		La	abel here	
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as mulaur attarnavia) a	r agent(s) to prosecute the application i	idantif	ied above, and	to transact all	
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I am the:					
X Applicant/Inventor.					
Assignee of record of the entire interest. See 37 CFR 3.71.					
Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96).					
SIGNATURE of Applicant or Assignee of Record					
Name Joylas	Hogston				
Signature			···		
Date February 3, 2004					
	ntors or assignees of record of the entire interest	or their	representative(s) a	are required. Submit mult	tiple
	ms are submitted.				

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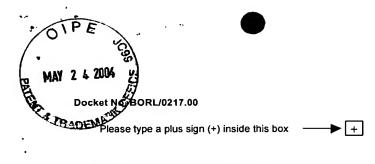
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Group Art Unit	Unassigned
Examiner Name	Unassigned
Attorney Docket Number	BORL/0217.00

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Assignee of record of the entire interest. See 37 CFR 3.71. Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96).							
		SIGNATURE of Applicant or As	ssignee	of	Record		
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Signature	M	h					
Date		ary 3, 2004					
NOTE: Signatures of all forms if more than one s	the inver signature	ntors or assignees of record of the entire in is required, see below*.	terest or	their	representative(s) a	re requ	ired. Submit multiple
▼Total of3	foi	ms are submitted.					



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X Practitioners at 0	Customer Number 28653	<u> </u>		ace Customer ımber Bar Code	
OR			La La	bel here	
Practitioner(s) na					
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John A. Sili	arc	34,3	,		
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Country	U.S.A.				
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I am the:					
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SIGNATURE of Applicant or Assignee of Record					
Name Jan No					
Name Gan No	Man Or				
Signature					
Dute	ary 3, 2004 ntors or assignees of record of the entire interest	or their	representative/s) s	re required. Submit multiple	
forms if more than one signature		or trielf	representative(s) a	re required. Submit multiple	
*Total of 3 fo	rms are submitted.				

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